<u>Indiana State Police Methamphetamine Laboratory Occurrence Report</u> This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date;	<u>11-2-2010</u>	Address:	4500 block of
Case #:	<u>45-51925</u>		Loudens Chapel Rd, Depauw
County:	<u>Harr</u> ison		
Operation Operation	al/Glassware/Equipment (only)	Seizure Location (d Residence Outbuilding Vehicle	heck all that apply) Hotel/Motel Open – No Structure Other:
Check all th	/Ammonia Reaction(s); osphorous/Iodine Reaction(s); oble Solvents: teactive Metal (Lithium); ous Ammonia; aloric Acid Gas Generator(s);		
Other (item and location):			
Yes _ No	er age 18 discovered (check one) (number present) port to Child Protective Services	Ephedrin	e Information e/Pseudoephedrine Tracking Log erchant Tip
This report is to be faxed to the following agencies that serve the location;			
Health Dep	ment: Ram <u>sey VFD</u> artment: <u>Harrison Co</u> ction Service: <u>N/A</u>	Fax: <u>N/A</u> Fax: <u>738.4</u> Fax: <u>N/A</u>	292
For further information regarding this methamphetamine laboratory, contact Investigating Officer: K Smith Phone 812.246.5424			

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.